

Subject:	Eclipse Live Project Update
Presented by:	Alasdair Willett, Interim Head of PMO
Submitted to:	NHS West Norfolk CCG Governing Body, 29 January 2015
Purpose of Paper:	To provide a comprehensive update on recent progress on the Eclipse Live project and give an overview of future activity for information and discussion.
Executive Summary:	
<p>Following the departure of the IT project manager in October 2014 and a subsequent programme management office review of the Eclipse Live project, a number of Eclipse-related activities have progressed, including roll-out to GP practices, the Green Envelope Scheme, supporting prescribing quality and dementia diagnosis and completing a refresh of project scope and governance.</p> <p>The refreshed project scope and delivery sequence has been agreed with stakeholders and highlighted areas of the project that would benefit from strengthening approach, particularly with respect to information governance and the operational aspects of rolling out new technology.</p> <p>A revised governance model has been designed to provide clear accountability for the project, support decision making and escalation functions, and enhance assurance for the CCG Governing Body. A new project manager started mid-January 2015 with initial focus on milestone planning, establishing new workstream delivery teams and embedding the new governance and reporting model.</p>	
KEY RISKS	
Clinical: The project supports improved access to clinical information to improve clinical decisions.	
Finance and Performance: Funding sources for the project are not defined and work will be carried out as part of the project plan to identify funding requirements and sources.	
Impact Assessment (environmental and equalities): Will be performed as part of the project.	
Reputation: There is a significant information governance risk due to the involvement of patient identifiable data and cross-organisation data sharing. Information governance activity has been built in as explicit work stream of the project.	
Legal: As above, significant risks around information governance that will be managed in the project.	
Patient focus (if appropriate):	
Reference to relevant Governing Body Assurance Framework:	
RECOMMENDATION:	
The Governing Body is asked to consider the current status of the Eclipse Live project and note the refreshed project scope, delivery sequence and governance arrangements that are being put in place.	

1. BACKGROUND

The Eclipse Live project originally commenced in March 2014 to establish an electronic integrated care record that, subject to individual patient consent, can be accessed through a secure NHS web-based information portal in order to improve the assessment and clinical management of elderly patients in both general practice and care homes in West Norfolk. Creating integrated care records and improving access to them for healthcare professionals and patients is a priority for the NHS as it underpins improved patient care. Achieving this aim is a complex mix involving not only the development of technology but also the evolution of national information governance (IG) regulations and changes to the way that professionals and patients access and use their health and care data.

Eclipse Live provides West Norfolk with a technology platform that can support the journey from improved access to primary care data through to a truly integrated digital care record. The complexities of the components of that journey, beyond the technology and into regulatory compliance and operational impacts, have needed to be understood to ensure that the CCG commits to providing a solution that is safe, secure and widely adopted.

Following the departure of the original IT project manager in October 2014, the CCG took the opportunity to conduct an informal Programme Management Office (PMO) review of the project, which found that:

1. Redefining the scope of the project and the sequence of delivery would be of great benefit to ensuring that key stakeholders were fully aware of the complexities of the project and had the opportunity to agree what would be delivered and in what order.
2. Clear project ownership and an effective governance structure needed to be in place so that senior stakeholders across the CCG and West Norfolk System Resilience Group (SRG) would receive regular delivery assurance.
3. The project will involve sharing data, including patient identifiable data, so clear and specific assurance against the CCG's IG obligations is required.
4. The project requires greater focus on overcoming the human and operational challenges of adopting new technology as part of clinical practice.

The first two of these points have been addressed through completing work to redefine the scope of the project (detailed in Section 3) and designing a revised governance model for the project (see Section 4). The latter two points are being addressed by ensuring that specific workstreams will be delivered within the project that are supported by specialists in IG and clinical operations.

2 PROGRESS TO DATE

GP Practice Roll-Out

The current version of Eclipse Live has been rolled out across West Norfolk GP practices, with 19 out of 21 practices or practice groups now connected to the system. This allows GP practices to use the system to provide risk alerts and intelligently analyse their own primary care records. Eclipse has now become a key tool to support prescribing quality and its use as an alerting and information source underpins the CCG's annual prescribing quality scheme. The majority of practices now use Eclipse for this purpose to varying degrees and the Prescribing Team will continue to drive usage in this way. In addition, they will be working with the Eclipse Live project team in future, bringing their experience in engaging practices with Eclipse to the broader project.

Project Team Refresh

Kathryn Ellis, Director of Operations, has been appointed Senior Responsible Owner (SRO) for the project, with delivery taking place as part of the CCG-led West Norfolk Alliance System Sustainability Programme. A new project team is being established, led by a cross functional project manager (rather than with pure IT focus), and Shawn Haney, an experienced project leader with significant experience across the local health economy, started in this role mid-January 2015 and is fully engaged in meeting stakeholders, understanding the project and commencing detailed planning.

Information Governance (IG)

A clear understanding of IG requirements has been gained and the needs of the project to engage specialist IG support from North East London Commissioning Support Unit (NELCSU) were reviewed and agreed in principle at the CCG's IG Committee in November 2014. The new project manager is now establishing the IG workstream as a priority and engaging with NEL CSU to finalise an IG support agreement for the project to commence work in February 2015.

Green Envelope Scheme

The Green Envelope Scheme provides a safe and secure process whereby GP surgeries can place a printed copy of the summary care record for all their care and nursing home patients in a sealed green 'emergency use only' envelope that is retained by care home managers and refreshed every three months. Until online access to a digital care record becomes available through the Eclipse Live project, the Green Envelope scheme allows clinical information to be made available to emergency health care professionals, whilst remaining compliant with IG requirements.

By providing access for emergency health care professionals to a snapshot of the primary care record that is no more than three months old, the outcome of this scheme will be better informed clinical decision making, leading to reduced emergency admissions from care homes, faster release of ambulance resources and improved patient experience. The Green Envelope takes us from a place where emergency care practitioners sometimes struggle to get relevant clinical information when called to attend at care homes, to a place where a standardised summary gives an understanding of where the patient was at a recent point in time. Discussion with colleagues in the ambulance service, community matrons and A&E consultants suggests that this scheme would make a real difference to the efficiency and safety of treating patients.

Following a period of feedback from potential users of the scheme, final adjustments are being made to communications and training materials for the scheme and roll-out to GP surgeries and care homes is expected to commence in the first week of February 2015. The CCG is recommending that all West Norfolk GP practices adopt this scheme where they do not have a similar local scheme in place and consider converting existing local arrangements to this approach. This will ensure compliance with IG requirements and benefit patients through a standardised approach that is recognised and used by emergency health care professionals when attending patients at West Norfolk care homes. This will also provide an important route of engagement to GPs, care homes and patients to support the development and roll-out of Eclipse Live as it replaces the envelope.

Dementia Diagnosis Data

Eclipse was recently used to support the provision of dementia diagnosis data to NHS England for those practices that provided permission for their Eclipse data to be used in this way. Analysis of clinical coding data through this method allowed a significant number of potential persons with dementia to be identified by practices for follow up and this exercise demonstrated how Eclipse could be used to make such exercises considerably easier for those practices that use Eclipse Live.

Project Scope and Governance

Agreement has been secured from key stakeholders including the CCG Clinical Executive (CLEX) and West Norfolk SRG on the high level scope and sequence of delivery for the remaining aspects of the project. In addition, a new project governance structure has been designed, in line with change management best practice, to provide clear decision making and accountability. Consequently, an Eclipse Live Project Board will be established by the new project manager in February 2015 to provide assurance and regular reporting to the CCG Governing Body and SRG on a monthly basis.

3 SCOPE

Appendix 1 provides an overview of the scope and sequence of Eclipse Live project deliverables that has now been agreed. The project has been re-defined into four distinct work streams as follows:

Data Quality and Information Governance

Led by an information governance specialist, this work stream will provide proactive advice and support to the project team to ensure that the project deliverables are fully compliant with IG regulations. It will also provide project assurance to the CCG's IG Committee and input to the IG toolkit. The focus of this work stream is:

1. *Short term (3 months):* Performing a review of existing IG arrangements supporting current use of Eclipse Live in West Norfolk, for GP alerts and risk stratification within practices, to provide assurance to the IG committee and input to the annual IG toolkit review. IG advice will also relate to a QIPP (Quality, Innovation, Productivity, Prevention) project to support patient risk stratification within practices.
2. *Medium Term (6 months):* Proactive IG support for the design and delivery of the next phase of operational roll-out activity; sharing consented primary care data across Alliance partners via broader access to Eclipse and the roll-out of Eclipse usage for care homes.
3. *Long Term (12 months):* Involvement in planning, shaping, design and delivery of the longer term data integration and infrastructure development phases of the project, including contributing refreshed advice as the regulatory position around integration of patient identifiable data continues to develop.

System-wide Operational Roll-Out

Using operational and clinical input to the project team, this work stream will work with GP practices, NHS providers, Norfolk County Council (NCC) and other members of the West Norfolk Alliance to ensure that the use of Eclipse as a key data source is accepted into wider clinical practice in compliance with good clinical practice and governance. The focus of this work stream is:

1. *Short term (3 months)*: Supporting and strengthening the use of Eclipse in general practice for alerts and risk stratification, including guidance on operating procedures and fair processing notices. Delivering Eclipse elements of a QIPP project to support risk stratification across practices.
2. *Medium Term (6 months)*: Roll-out Eclipse usage across NHS providers and Alliance partners for access to primary care data, ensuring appropriate inclusion within organisations operating protocols and adherence to consent and information security requirements. Provision of suitable training and support to the enlarged user base and promotion of digital passport use amongst targeted patient groups. Piloting a telephone triage service to support clinical users.
3. *Long Term (12 months)*: Expansion of digital passport usage beyond targeted groups to cover the whole West Norfolk patient population. Evaluation and development of the triage service. Operational design and process integration in support of the West Norfolk Digital Integrated Record.

Care Home Integration

Using operational and clinical input to the project team, this work stream will concentrate on delivering Eclipse into care and nursing homes to maximise its use in supporting the health and care needs of frail and elderly patients. The focus of this work stream is:

1. *Short term (3 months)*: Delivering the Green Envelope project, a paper based sharing of basic primary care data for use in emergencies, as a stopgap measure whilst Eclipse is rolled out to care homes.
2. *Medium Term (6 months)*: Early adopter roll-out of Eclipse usage across care homes for access to primary care data, ensuring appropriate measures to ensure adherence to consent and information security requirements. Provision of suitable training and support to care home staff and roll-out of digital passports to residents.
3. *Long Term (12 months)*: Completing late adopter roll-out of Eclipse across care homes. Integration of Eclipse usage with telehealth solutions that may be adopted in West Norfolk. Participation in the development of care home and nursing home specific functionality on Eclipse.

Infrastructure

Led by an IT and data infrastructure specialist, this work stream will plan and deliver the necessary infrastructure to support the expanded future use of Eclipse and other components to needed to deliver a West Norfolk Digital Integrated Care Record. The focus of this work stream is:

1. *Short term (3 months)*: Evaluation of the recent unsuccessful bid to secure funding from the Integrated Digital Care Technology Fund, identification of future opportunities for national funding and planning for bids.
2. *Medium Term (6 months)*: High level design and development of bid content. Evaluation of options for future infrastructure and components. Submission of national funding bids and/or identification of local sources of funding.
3. *Long Term (12 months)*: Design, build and testing of West Norfolk Digital Integrated Care Record infrastructure. Data migration, data quality and operational acceptance for the new platform. Implementation of the ongoing support and development model.

4 GOVERNANCE

Appendix 2 shows the governance model for the Eclipse Live project going forward. The governance structure follows recommended NHS best practice to adopt a PRINCE2 compliant governance structure and centres on a project board that has full accountability for the project. Sponsorship of the project will be from the CCG Governing Body, who, along with CLEX and SRG, will be kept informed via regular reporting.

Whilst overall ownership of the project sits with the CCG, it is not a stand-alone project due to the myriad involvement of NHS and social care organisations, so delivery of the project will be undertaken as part of the West Norfolk Alliance System Sustainability Programme to ensure visibility and integration across the Alliance partners.

The establishment of clear lines of ownership, accountability and reporting will allow the project to move forward with suitable control and support, providing rapid access to decision making and escalation routes to support an accelerated rate of delivery in future.

5 NEXT STEPS

Next steps to be undertaken by the new project manager in February 2015 are:

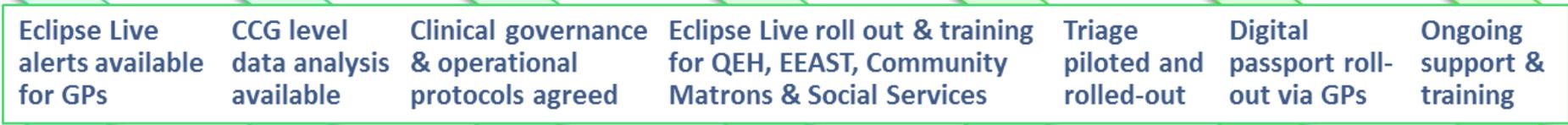
- Complete a QIPP project initiation document to support patient risk stratification within practices that delivers against the first two elements of the System-wide Operational Roll-Out workstream (Eclipse Live alerts for GPs and CCG level data analysis available).
- Establish the information governance workstream, engaging specialist resources and commencing work on first two elements of the Data Quality & Information Governance workstream (review of supplier contracts and IG review of data sharing arrangements).
- Create a high level delivery plan and determine milestones for all remaining elements shown on the project scope.
- Establish the Eclipse Live Project Board and regular monthly assurance updates to the CCG Governing Body and SRG.
- Determine the detailed delivery plan for the Care Home Integration workstream activity that will commence following launch of the Green Envelope Scheme.

Scope and Sequence of Eclipse Live Project Deliverables

Data Quality & Information Governance



System Wide Operational Roll Out



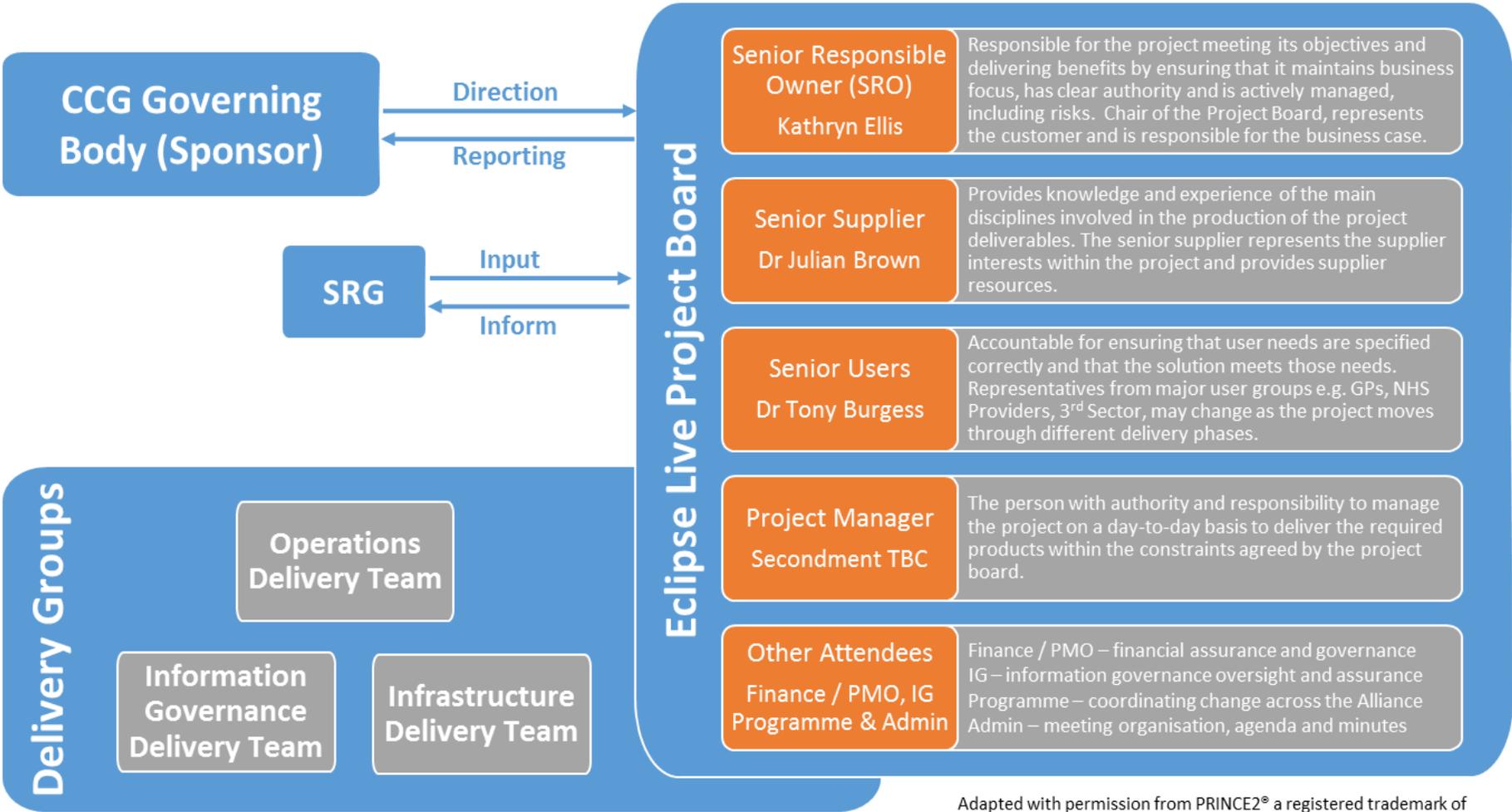
Care Home Integration



Infrastructure



Eclipse Live Project Proposed Governance Structure



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